Provider Type 30 and 83 Personal Care Services Reimbursement Rates

Updated: May 1, 2015

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Note:

Procedure codes with a rate of \$0.00 are reimbursed at 62% of Usual and Customary charges unless noted otherwise in Nevada Medicaid policy.

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Modifier List

Proc Code	Description	Mod	Rate
A0160	NONER TRANSPORT CASE WORKER		0.28
T1019	PERSONAL CARE SER PER 15 MIN		4.25